## REMARKS

This Response is to the non-final Office Action dated April 1, 2010. Claims 13 has been canceled herein without disclaimer. Claims 2, 3, 7, 17 and 32 were previously canceled without disclaimer. Claims 1, 13, 16 and 30 have been amended. No new matter has been added by these amendments. Support for these amendments can be found, for example, at Fig. 39, Fig. 39A, paragraph [0396] and paragraph [0397] of U.S. Publication No. 2004/0172302 (the present application), and Claim 13 as previously presented. Please charge Deposit Account No. 02-1818 for any fees due in connection with this Response.

In the Office Action, claims 1, 4 to 6, 8 to 16, 18 to 31 and 33 to 35 were rejected under 35 U.S.C. 103(a) as being unpatentable over U.S. Patent No. 6,408,330 to De La Huerga et al. ("De La Huerga") in view of U.S. Patent No. 6,241,704 to Peterson, et al. ("Peterson"). Applicants respectfully traverse this rejection, but have amended Claims 1, 16 and 30 to expedite prosecution.

Independent claim 1 as presently presented is directed to a method for verifying medical device settings within a healthcare system including, in part:

initiating a comparison of piggyback parameters sent from the medical device and at least a portion of the order via the input device of the remote computer; and after initiating the comparison of the piggyback operational parameters, the first computer comparing at least one of the piggyback operational parameters sent from the medical device to the portion of the order, and if the piggyback operational parameters sent from the medical device matches the portion of the order, displaying an instruction on the display device of the remote computer.

Figs. 39 and 39A of the present application, reproduced below, illustrate, in part, an embodiment of the method of claim 1 including the comparison of piggyback operational parameters.

Nurse C, RN

Patient, Three, Mr.

1 West; 100-C

MD1, Test

Pharm & Pump Comparison

Continuous injuston Rx Epdium Chloride 6.5% 1000 Ml. Route: intervences Flow Balan 65 Ml. W Entimeted Administration

Period; 20 flows

Program the Pump Chassel and:

> 11 this is a PRIMARY - One Compare below Now and with unity instructed to start pump channel.

> 11 this is a PRIMARY - Press the start pump channel.

> 11 this is a PRIMARY - Press the start pump channel.

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Nurse A, RN

Patient, One
Rm - Bed 101-B
Dr. One (111)111-1111 ext. 1

Pharm & Pump Comparison

Ancel 1 g, in Dextrose, 5% 50 mL
run at 100 mL/hr

Pharm = Pump
Label = Pump
Label = Stitings

Rate 100 mL/hr 100 mL/hr

Comparison MATCHES.
Press "Start" Key on pump.

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FIG. 39

FIG. 39A

Applicants respectfully submit that *De la Huerga* and *Peterson* do <u>not</u> disclose the method of claim 1 as presently presented including initiating a comparison of piggyback parameters sent from the medical device and at least a portion of the order via the input device of the remote computer, after initiating the comparison of the piggyback operational parameters, the first computer comparing at least one of the piggyback operational parameters sent from the medical device to the portion of the order, and if the piggyback operational parameters sent from the medical device matches the portion of the order, displaying an instruction on the display device of the remote computer

The Office Action at pages 5 and 9 cites to *De La Huerga* for disclosure of comparing piggyback parameters sent from the medical device and at least a portion of the order via the input device of the remote computer. In particular, the Response to Arguments Section of the Office Action at page 9 cites to *De La Huerga* column 37, lines 17 to 31; column 43, lines 19 to 28; column 53, line 21 to 28; and column 54, lines 49 to 58 for the disclosure of initiating a comparison of piggyback parameters sent from the medical device to a portion of the order.

Column 37, lines 17 to 31 of De la Huerga discloses:

Referring also to FIG. 14B, an exemplary browser screen 480 which corresponds to packet 440 is illustrated. Screen 480 includes a plurality of elements which indicate all information associated with a drug administration event. The elements, which correspond to identically marked fields in packet 440 (see FIG. 14A), include an identification

element 445, a report type element 448, an ID verification element 453, modifiable dose elements 456 and 460, an administrating physician identification element 464 including date/time 469, a dispensing physician identification element 468, and approval icon 476. When formatted data packet 440 is transmitted to a terminal 60, the ICD 10 may be programmed to emulate a file structure device, wherein the open file command of the browser 480 may be used to request data from the ICD 10.

## Column 43, lines 19 to 28 of De la Huerga discloses:

The additional information is not necessary to understand the meaning of the document. Therefore, it is contemplated that the additional data would typically be added to the document in some non-visual manner. For example, the additional data may be added as some hidden text in a hidden note field or the like. On the other hand, the additional data may be added as a visual bar having varying pixel intensities. The important aspect of the additional data is that the additional data enables a secure content specific watermark to be generated which is not easily subjected to decryption.

## Column 53, lines 21 to 28 of De la Huerga discloses:

As in the previous example, when Penicillin and Tylenol are placed inside container 200, container 200 is positioned proximate a transceiver associated with dispenser 150 and dispensation information is transmitted to container device 75" via the dispenser specifier apparatus or output device 64 (see FIG. 3). In this case, however, transmitted information includes the entire packet 440, less the descriptive information (e.g. receiving patient i.d., date, time, administering physician, etc.).

## Column 54, lines 49 to 58 of De la Huerga discloses:

At the end of a prescribed administration or reporting period, if data for a specific prescription has been provided the dispenser 150 may retrieve the data and compare the data to the original prescription. In the present case where the administered medication was modified and therefore does not match the prescription exactly, it is contemplated that dispenser 150 generates a prescription/administration (P/A) quality control modification report indicating that the drugs administered were in fact different than those prescribed. In addition the P/A report may also indicate matching prescriptions and administrations.

Applicants respectfully submit that none of the above-quoted passages of *De la Huerga* disclose initiating a comparison of piggyback operational parameters sent from a medical device and at least a portion of an order via an input device of a remote computer, and after initiating the

comparison of the piggyback operational parameters, a first computer comparing at least one of the piggyback operational parameters sent from the medical device to the portion of the order.

Peterson does not remedy the deficiencies of De la Huerga. Peterson also fails to disclose the method of claim 1 as presently presented including initiating a comparison of piggyback parameters sent from a medical device and at least a portion of an order via an input device of a remote computer.

For at least the above reasons, Applicants respectfully submit that independent claim 1 as presently presented and its respective dependent claims 4 to 6 and 8 to 12 are patentably distinguished over *De la Huerga* and *Peterson*. Independent claims 16 and 30 as presently presented include similar elements to independent claim 1 as presently presented. Applicants accordingly respectfully submit that for at least the same reason given above with respect to independent claim 1, independent claims 16 and 30 as presently presented and their respective dependent claims 18 to 29, 31 and 33 to 35 are also patentably distinguished over *De la Huerga* and *Peterson*.

Further, Applicants respectfully submit that at least dependent claims 21 and 22 are further distinguished over *De la Huerga* and *Peterson*. Regarding claim 21, the Office Action cites to column 1, lines 36 to 47 and column 9, lines 42 to 49 of *De La Huerga* as disclosing linking a pumping channel with a patient identifier and an order identifier. Column 9, lines 42 to 49, merely refers to a patient identification bracelet having information which can be transmitted to an information collection unit. Nowhere does this passage disclose linking a pumping channel with a patient identifier and an order identifier. Column 1, lines 36 to 47 is likewise deficient and does not disclose linking any pumping channels to a patient identifier and an order identifier.

Regarding Claim 22, the Office Action again cites to column 1, lines 36 to 47 and column 9, lines 42 to 49 of *De La Huerga* for disclosure of *precluding* a comparison of the data transmitted from the medical device to the data in the order where a link between the patient identifier and the order identifier is not established. Applicants respectfully submits that these passages do not disclose *precluding* anything.

For the foregoing reasons, Applicants respectfully submit that the present application is in condition for allowance and earnestly solicit reconsideration of same.

Respectfully submitted,

K&L Gates-LLP

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